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Annual Report

OF THE

MEDICAL OFFICER OF HEALTH

(HUGH STEVENSON, M.B., C.M.)

AND THE

SANITARY INSPECTOR

(T. WILSON, Cert. S.I.B.)

1938



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Rothwell Urban District Council.

ANNUAL HEALTH REPORT.

STATISTICAL MEMORANDA FOR 1938.

Area in Acres	.. .. .	10,695
Population (Mid-Year, 1938)	.. .. .	24,440
Number of Inhabited Houses in District at end of 1938	.. .. .	6,935
Rateable Value to General Rate on the 1st April, 1938	.. .. .	£96,287
Sum represented by a Penny Rate	.. .. .	£385

BIRTHS (LIVE).

Legitimate—172 Males, 160 Females	}	339
Illegitimate—3 Males, 4 Females		
Birth Rate	.. .. .	13·87

DEATHS.

124 Males, 136 Females	.. .. .	260
Death Rate	.. .. .	10·38
Specify any unusual or excessive mortality during the year		None.
Infectious Disease Death Rate	.. .. .	0·082

INFANTILE DEATHS.

Deaths of Infants under one year of age—		
Legitimate 18; Illegitimate, 1	.. .. .	19
Infantile Death Rate per 1,000 live births	.. .. .	65·0

STAFF OF HEALTH DEPARTMENT.

HUGH STEVENSON, M.B., C.M.	..	Medical Officer of Health. Medical Superintendent of the Rothwell Isolation Hospital. Medical Officer, Maternity and Child Welfare Services.
T. WILSON, Cert. S.I.B., M.S.I.A., Certified Meat Inspector, Certified Smoke Inspector.		Senior Sanitary Inspector and Cleansing Superintendent.
R. A. NAYLOR, Cert. S.I.B., M.S.I.A., Assoc. Inst. Hygiene		Additional Sanitary Inspector.
G. F. IDLE, Cert. S.I.B., M.S.I.A.	..	Additional Sanitary Inspector.
Miss M. CAMERON, State Registered Nurse, S.C.M., C.R.S.I.		Superintendent Health Visitor.
Miss E. ABRAM, Certified Midwife	..	Health Visitor.
Miss G. M. HARVEY, State Registered Nurse, S.C.M., C.R.S.I.		Health Visitor.
Miss M. WHITTINGHAM	.. .. .	Clerk.
Miss I. BIRBECK	.. .. .	Clerk (M. and C.W. Clinic).
H. T. HODGSON	.. .. .	Junior Clerk.

Rothwell Urban District Council

ANNUAL REPORT

OF THE

MEDICAL OFFICER OF HEALTH, 1938.

*To the Chairman and Members of the
Rothwell Urban District Council.*

Gentlemen,

I now beg to submit to you, for consideration, my Report on the Public Health of your District during the year ending December 31st, 1938.

AN EXPLANATORY PREFACE.

This Annual Report for the year 1938 will be seen to bear a striking contrast, both in its range and scope, to those which, over a now lengthy period of years, it has been my universal custom and privilege to submit, and I think a word of explanation is due, and particularly to those who may possibly wonder at and even, maybe, regret, the absence of most of its customary and familiar features.

This explanation is a simple one and it is that, on the present occasion, the space at my disposal and, as a consequence, my opportunities, have, for reasons which are, of course, no concern of mine, been strictly limited and apportioned, thus making it a patent impossibility to present the discursive and analytical Report which has hitherto been my practice.

A Submission.—I—it is a matter of opinion as to whether I am right or wrong, whether I am justified or unjustified—have, throughout, held firmly and unyieldingly to the belief that a Medical Officer of Health should, in matters of Health doctrines and policies, endeavour to give a lead to Public Opinion, should advise and suggest, should not be content to be merely a recorder of past and dead events and happenings, but rather that, as one in whom has been vested a vital responsibility, he should—to recall the somewhat flamboyant and symbolic language in which it was my wont to clothe my thoughts and ideas in those days when my fancy had freer vent—be a sort of direction post, with finger pointing the way which, in his view, should be travelled, were the ultimate goal of health establishment and well-being to be attained.

In a word, a Medical Officer should, or so it appears to me, be one but little concerned with the Past, apart from the lessons which may, haply, be extracted from it, but mightily concerned about the Future.

It is a platitude to say that we cannot live on the Past alone—and statistics, if you but think of it, merely emblemise what is past and gone beyond recall. Unhealthy concentration upon past events and achievements, or, what is no less bad, obstinate and complacent contentment with the Present and what it affords, is not only, in the long run, inducive of mental stasis and even mental morbidity, but is, at the same time, the very antithesis of enterprise, of daring and progressiveness, attributes which, in my humble opinion, are, or should be, the inviolable creed and sign manual of every one to whom has been entrusted the care and guardianship of the Public Health.

The Fundament of Health Progress.—Even the most indifferent observer cannot fail to be impressed by the literally monumental transformations in Public Health which even recent decades, to go no further back, have witnessed and I challenge anyone to claim that such transcendental changes, such mighty achievements, have been brought into being merely by gazing contemplatively, and more or less disinterestedly, upon what has already happened and become history, no matter how meritorious it may chance to be—and that, I suppose, is what statistics really mean.

The word Progress, whether in a health sense or any other, means, and can only mean, “to move forward,” and, in writing those Reports, it has ever been my aim to keep that axiom firmly and steadfastly in the foreground.

Public Opinion the Real Driving Force in the End.—Further, in compiling those Reports year by year, I have always resolutely endeavoured to keep clearly in mind the belief, and moreover to act upon it, that a strong, a forceful, and an informed and instructed Public Opinion was by far the most potent implement in the forging of a vigorous, a determined, and a militant policy of health progress and reform. What Public Opinion says to-day—for such is the lesson long experience has taught me—a Council, willy-nilly, will do to-morrow.

A Regret and a Claim.—It is to me, perhaps understandably, a matter of personal regret that this now long sequence of annual propagandist appeal has thus come arbitrarily to an end. I, none-the-less, cling obstinately to the conviction that such appeals did constitute a rallying point and did contribute at least something towards keeping the wheels of Health Progress revolving in this district, and the perhaps vain belief that not all the seed which I have so diligently, and so prodigally, scattered, over so many years, has fallen upon stony ground, remains to me a consolation.

A Final Reflection.—This, after not a few years, may be accepted as my final effort at “sermonizing” during what remains of my pilgrimage as Medical Officer of Health and must be my excuse for insertion of what may possibly, at a superficial glance, be regarded as something inapt to an Annual Health Report, although, even so, I cannot refrain from once again emphasising that, according to the creed which I hold, nothing, whatever it be, is really alien to such a Report which has for its instigating motive the inculcation of health practices and the dissemination of health doctrines and teaching, and, whether success or failure has crowned my efforts, such at least has been my avowed intent and design throughout.

VITAL STATISTICS.

In 1937, the Methley Urban and Hunslet Rural Authorities were amalgamated with the Rothwell Urban District. In the case of vital statistics referred to in the subjacent paragraphs, all figures dealing with the years 1937 and 1938 refer to the new enlarged area, whilst all figures dealing with years prior to 1937 refer to the old, or pre-amalgamation, Rothwell area.

POPULATION.

The estimated population of the extended Rothwell Urban District in Mid-Year, 1938, as supplied by the Registrar General, was 24,440, as compared with 24,350 in the previous year. The number of inhabited houses at the end of 1938 was 6,935, as compared with 6,665, in 1937, and the number of inhabitants per house was 3·65 as compared with 4·05 as divulged by the 1931 Census.

BIRTHS.

The total number of births registered in the entire Urban District during 1938, was 339, comprising 175 males and 164 females, as compared with 351, comprising 194 males and 157 females, in 1937.

STILLBIRTHS.

The number of stillbirths registered during 1938 was 17, comprising 9 males and 8 females, of which one male was illegitimate; this is equivalent to a rate of 0·74 still births per 1,000 population, the National rate for the same year being 0·60.

ILLEGITIMATE BIRTHS.

The number of illegitimate births (live) registered during 1938 was seven, comprising three males and four females, as compared with six such births in 1937, and with nine in 1936, and is equivalent to one in 48, or 2·07 per cent. of the total births registered, as compared with one in 58 or 1·7 per cent. in the preceding year.

BIRTH RATE.

The Birth Rate for the year 1938 was 13·87, as compared with 14·41 in 1937, with 14·62 in 1936, and with 15·13 in 1935; the National birth rate for 1938 was 15·1.

EXCESS OF BIRTHS OVER DEATHS.

During 1938, records show that, in the extended area, the excess of births over deaths totalled 79. The Ward claiming the largest excess was the North Ward of Rothwell, with a figure of 26, followed, in order of merit, by the Lofthouse-with-Thorpe Ward, which showed an excess total of 12. As someone must be first so must someone be last and, on the present occasion, that dubious distinction has to be awarded to the Woodlesford and the Methley Wards, each of which just contrives to escape total eclipse by presenting an apologetic excess figure of three.

The subjacent Table gives detailed records.

TABLE 1.
BIRTHS AND DEATHS IN VARIOUS WARDS 1938.

AREA	BIRTHS.			DEATHS.			Total excess Births over Deaths
	Males.	Fe- males.	Total.	Males.	Fe- males.	Total.	
Urban District Area	175	164	339	124	136	260	79
North Ward ..	36	30	66	18	22	40	26
South Ward ..	20	15	35	14	11	25	10
Stourton Ward ..	20	16	36	16	12	28	8
Lofthouse-with- Thorpe Ward ..	27	24	51	14	25	39	12
Carlton Ward ..	21	23	44	17	19	36	8
Oulton Ward ..	11	17	28	9	10	19	9
Woodlesford Ward	13	13	26	12	11	23	3
Methley Ward ..	27	26	53	24	26	50	3

DEATHS.

The total number of deaths registered in the new area during 1938 was 260, comprising 124 males and 136 females, as compared with 265 in 1937 and with 159 in 1936, this latter total representing pre-amalgamation Rothwell area.

SURVEY OF "CAUSES OF DEATH."

I shall now submit a table, in age groups, detailing the various causes of death responsible for the fatalities in this area during 1938.

TABLE 2.

TABLE SHOWING CAUSES OF DEATH, IN AGE GROUPS, FOR 1938.

Cause of Death.	Under 1 yr.		1-2 yrs.		2-5 yrs.		5-15 yrs.		15-25 yrs.		25-45 yrs.		45-65 yrs.		65-75 yrs.		Over 75 yrs.		All ages.	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
Typhoid	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Measles	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Scarlet Fever ..	0	0	0	0	1	0	0	1	0	0	0	0	0	0	0	0	0	0	1	1
Whooping Cough ..	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Diphtheria	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Influenza	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0	0	0	1	1
Tuberculosis (Pulmonary) ..	0	0	0	0	0	0	0	1	1	2	3	2	2	0	1	0	0	0	7	5
Other Tuberculous Diseases	0	0	0	0	1	0	1	1	1	0	0	1	0	0	0	0	0	0	3	2
Cancer	0	0	0	0	0	0	0	0	0	0	3	0	6	7	1	1	2	5	12	13
Diabetes	0	0	0	0	0	0	0	0	0	0	0	0	1	2	0	0	0	4	1	6
Cerebral Hæmorrhage ..	0	0	0	0	0	0	0	0	0	0	0	0	3	4	2	5	2	4	7	13
Heart Diseases ..	0	0	0	0	0	0	0	0	1	2	1	6	9	8	12	10	12	26	35	35
Aneurysm	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	0
Other Circulatory Diseases	0	0	0	0	0	0	0	0	0	0	0	0	2	1	4	0	6	5	12	6
Bronchitis	0	0	0	0	0	0	0	0	0	0	0	0	2	0	0	2	1	1	3	3
Pneumonia	2	1	0	0	0	0	0	0	1	0	0	0	2	0	2	0	0	2	7	3
Other Respiratory Diseases	0	0	0	0	0	0	0	0	1	0	0	0	0	1	0	0	0	0	1	1
Cancer of Stomach and Duodenum ..	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0	0	1	1
Diarrhoea. (Under two years)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Appendicitis	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1	0
Septicæmic Sepsis ..	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Constitutional debility, Premature birth, etc.	9	3	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	9	3
Idiocy	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	3	15	3	15
Suicide	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	0	0	2	0
Various Causes ..	4	0	0	1	0	2	0	0	4	2	5	6	6	7	4	2	2	3	25	23
Total Causes ..	15	4	0	1	2	2	1	4	8	5	14	11	33	35	25	23	26	51	124	136

Infant deaths under one year, as, likewise, deaths from Tuberculosis, will receive further and detailed notice elsewhere in this Report.

As regards the above Table, I should like to direct attention to the fact that, as occurs year after year in unbroken sequence, the proportion of deaths once again claimed by Heart Disease is indeed remarkable—almost every **fourth** death recorded in the district from all causes and at all ages! The nearest rival to Heart

Disease as a mortality producer is Cancer which, with 25 deaths during the year, claimed roughly one in ten of all recorded deaths. Perhaps the further fact that no fewer than 20 deaths were returned during the year as due to Cerebral Haemorrhage (stroke), is worthy of passing note.

I now wish to submit a table dealing with particulars of deaths in age groups as relating to this district.

TABLE 3.
DEATHS IN AGE GROUPS, 1938.

Under One year.	1 to 5 years.	5 to 15 years.	15 to 25 years.	25 to 45 years.	45 to 65 years.	Over 65 years.	Total.
19	5	5	13	25	68	125	260

The following table, relative to deaths in this district from Infectious Disease, is self-explanatory.

TABLE 4.
DEATHS FROM INFECTIOUS DISEASE (EXCLUDING TUBERCULOSIS) 1938.

Ward	Scarlet Fever.	Measles.	Whooping Cough.	Diphtheria.	Enteric Fever.	Smallpox.	Diarrhoea, (Under 2 years.)	Total
North	1	0	0	0	0	0	0	1
South	0	0	0	0	0	0	0	0
Stourton	0	0	0	0	0	0	0	0
Lofthouse-with-Thorpe	0	0	0	0	0	0	0	0
Carlton	0	0	0	0	0	0	0	0
Oulton	0	0	0	0	0	0	0	0
Woodlesford	1	0	0	0	0	0	0	1
Methley	0	0	0	0	0	0	0	0
Total	2	0	0	0	0	0	0	2

DEATH RATE.

The District Death Rate for 1938 was 10.38 per 1,000 inhabitants, as compared with 10.88 in 1937, with 10.24 in 1936, and with 10.71 in 1935. The National Rate for 1938 was 11.6.

INQUESTS.

Nine inquests were held in this district during 1938, as compared with twenty-two in the preceding year. The following table shows the number of inquests held in the various Wards during the period in question.

TABLE 5.

North Ward.	South Ward.	Stourton Ward.	Lofthouse-with-Thorpe. Ward.	Carlton Ward.	Oulton Ward.	Woodlesford Ward.	Methley. Ward.	Total.
3	3	0	1	1	0	1	0	9

CHILD WELFARE CLINIC.

I have endeavoured, for the year 1938, to depict the work of the Child Welfare Service, including Clinics, in the form of a series of tables which I think ought to convey a fairly accurate impression as to the amount, and range, of the work carried out during the year.

TABLE 6.

CLINIC ATTENDANCES IN AGE GROUPS SHOWING AVERAGE WEEKLY ATTENDANCE AT FIVE CLINICS.

Clinic	Under 1 year	1-2 years	2-5 years	Total	Average Weekly Attendance
Rothwell.. ..	2,412	1,059	1,582	5,053	107·51
Lofthouse	829	559	923	2,311	49·17
Stourton	647	211	393	1,251	26·61
Oulton	565	199	511	1,275	27·12
Methley	960	454	448	1,862	36·50
Total	5,413	2,482	3,857	11,752	246·91

TABLE 6a.

INDIVIDUAL CHILDREN IN CLINIC ATTENDANCE DURING 1938.

Clinic	Under 1 year	1-2 years	2-5 years	Total
Rothwell.. ..	99	107	209	415
Lofthouse	31	40	127	198
Stourton	32	17	46	95
Oulton	31	30	77	138
Methley	31	41	65	137
Total	224	235	524	983

TABLE 6b.
NEW CLINIC ENTRANTS DURING 1938.

Clinic.	Under 1 year.	1-2 years.	2-5 years.	Total.
Rothwell	129	13	27	169
Lofthouse	45	11	28	84
Stourton	31	1	4	36
Oulton	45	2	10	57
Methley	40	7	7	54
Total	290	34	76	400

Sunray Clinic.—The following detailed table will show at a glance the work carried out in the Sunray Clinic during the year. Our experience, now fairly extensive, demonstrates that the subjection of defective, debilitated, and under-standard children to this form of treatment, has an undoubted beneficial influence. I may, incidentally, add that this facility is, likewise, taken advantage of by quite a number of Expectant Mothers and, likewise, that, by arrangement with the Education Authority of the West Riding County Council, we give Sunray treatment to such school-children as are referred to us by the School Medical Officer.

TABLE 7.
RECORD OF SUNRAY WORK DURING 1938.

No. of Sessions	No. of Treat- ments given	No. of individual Children treated			No. of Mothers treated	Total	Average Attendance per Session.
		Under 1 year	1-2 years	2-5 years			
102	2,424	—	24	47	17	88	23·76

NOTE.—Eleven children attending School received 351 Treatments (in accordance with arrangement with the West Riding County Council).

HOME VISITATION.

The following table reveals, in detail, the Home Visitation work carried out by the Clinic Staff during the year. The more spectacular Clinic side of the work tends somewhat to disguise the profound importance of visitation in the home, with the opportunities consequently afforded of intimate contact with the family life of

the individual household. It, furthermore, enables the Health Visitor to judge for herself, by personal observation, as to the standard of home life adopted as, likewise, the manner, and degree, to which Clinic teaching is put into practice in the home.

TABLE 8.
HEALTH VISITORS' YEARLY RECORD INCLUDING DETAILS
OF VISITS TO TUBERCULOSIS CASES.

	First Visits. (Under 1 year).	Re-visits. (Under 1 year).	1-2 years.	2-5 years.	Ante-natal First Visits.	Ante-natal Re-visits.	Total. (Home Visits).	Home Visits to Tuberculosis Cases.				
								First Visits to Pulmonary Cases.	Re-visits to Pulmonary Cases.	First Visits to Non-Pulmonary Cases.	Re-Visits to Non-Pulmonary Cases.	Total Home Visits (M. and C. W. and Tuberculosis).
Miss Cameron	42	472	431	1,878	17	92	2,952	—	5	—	—	2,957
Miss Abrams	143	1,065	1,102	3,677	12	81	6,080	—	234	2	25	6,341
Miss Harvey	142	999	944	3,251	24	99	5,459	2	141	4	117	5,723
Total ..	327	2,536	2,477	8,806	53	272	14,491	2	380	6	142	15,021

NOTE.—Total Sessions held during 1938 :—Infant Welfare, 239 ; Ultra Violet Ray, 102 ; Ante-Natal, 59.

Now for a brief reference to some of the ancillary activities of a Child Welfare Service :—

Grants of Milk to Necessitous Cases—children under five and expectant and nursing mothers—and Details of Sales of Dried Milk and Cod Liver Oil.—The subjacent table should, I think, explain itself. I may further add that Dried Milks are, likewise, supplied at reduced rates in cases where certified family income justifies it and also, that Cod Liver Oil, as well as such associates as Iron, calcium, adexolin, halibut oil, and so on, are, in terms of an approved Income Scale, supplied free, or at reduced rates.

TABLE 9.
GRANTS OF FREE MILK : SALES OF DRIED MILK AND COD
LIVER OIL.

Number of Packets of Dried Milk sold at cost price	5,226
Number of Packets of Dried Milk given gratis	189
Number of pints of Raw Milk given gratis	28
Number of ounces of Cod Liver Oil (Pure) (Sold at ½d. per oz.) ..	6,604
Number of ounces of Cod Liver Oil (Emulsion) (Sold at ¾d. per oz.) ..	8,653
Number of Adexolin Capsules (Sold at 6d. for fourteen)	6,622
Number of ounces of Adexolin Liquid (Sold at 3/2 per oz.) ..	34½

Infant Feeding during 1938.—The following Table will show at a glance the manner in which the mothers of this district have fulfilled this, one of the most vital of all obligations which they owe to their children.

TABLE 10.
PARTICULARS OF INFANT FEEDING DURING 1938.

Number of Infants breast fed for 6 months or longer	152
Number of Infants found to be Artificially Fed at First Visit (2 weeks old)	53
Further number of Infants found to be Artificially Fed at Second Visit (6 weeks old)	56
Further number of Infants found to be Artificially Fed at Third Visit (12 weeks old)	21
Further number of Infants found to be Artificially Fed at Fourth Visit (16 weeks old)	3
Further number of Infants found to be Artificially Fed at Fifth Visit (20 weeks old)	0

Methods of Feeding (Artificial).	Reasons for Discontinuation of Breast Feeding.
Cows' Milk 33	Mothers working 2
Dried Milk 79	Maternal Debility 54
Other Proprietary Foods 21	Mastitis 2
	Illness of Infant 6 } 7
	Premature Infant 1 }
	Hare Lip 2
	Adopted Child 1
	Advised by Medical Attendant 14
	Mother in Hospital 2
	No apparent reason 49
133	133

RESCUE SERVICES.

The following is a compendium of Rescue, or Salvage, services operative in this district which, I think, may be accepted as indicative of the effort made by this Authority to provide adequately for every essential need of mothers and young children under five years.

Hospital treatment for all emergency maternity cases.

Hospital treatment for cases in which housing conditions are undesirable.

Hospital provision (free) for cases of Puerperal Pyrexia.

Ambulance free in all above cases.

Consultation at home with Specialist in cases of abnormalities, arising ante-natal, post-natal, or during labour.

Consultative Ante-Natal Clinic with obstetric Specialist in attendance.

Provision (free) for X-ray examination of maternity cases of dubious diagnosis.

Consultative Ophthalmic clinic, with Specialist in attendance.

Home consultation with Ophthalmic Specialist in emergency cases.

Hospital provision for cases of Ophthalmia Neonatorum.

Orthopædic hospital provision for children under five.

Provision of dental treatment for expectant and nursing mothers.

Provision of dental treatment for children under five.

Convalescent Home treatment for debilitated children under five.

Seaside Convalescent Home provision for debilitated mothers and infants.

Child Welfare, ante-natal and post-natal Services (under our own control) with Medical and Health Visiting Staff.

Immunisation (Diphtheria) Clinic.

Grants of free milk to debilitated children under five.

Grants of free milk to nursing and expectant mothers.

Assisted Scheme.—Grants of dried milks and Cod Liver Oil at reduced terms in accordance with income.

Provision of Sunray treatment for debilitated children under five and for expectant mothers.

Home Helps.

I may add that, complementary to the above provisions, Convalescent Home treatment for debilitated women is, likewise, ensured through the medium of our Voluntary Nursing Association.

Home Helps.—An actively operating provision, established in December, 1935, which renders yeoman service to women in industrial homes during the testing late period of pregnancy.

Convalescent Home Provision for Debilitated Mothers and their Infants.—During 1938, 10 mothers, with their Infants, received benefit under this Scheme, being sent to Withernsea Home for Mothers and Babies for a period of two weeks each. I can only say once again, as I have said more than once before, that I consider that, of the whole range of what may be termed altruistic health provisions, this is one of the most beneficent, as well as one of the most appreciated, and I sincerely wish its scope could be generously extended.

Dental Treatment for Children under Five and for Expectant and Nursing Mothers.—Yet another most admirable provision. Under arrangement with the West Riding County Council Dental Service, the Maternity and Child Welfare Authority of this district provides dental treatment for children under five years, whilst, in the case of expectant and nursing mothers, arrangements for treatment are made with their own dentists, a subsidy, with a maximum of £5 being made by the Authority in regard to costs.

Contributory Payments towards Bus Fares.—In the case of children attending the Sunray Clinic, and in the case of women attending the Ante-Natal Clinic, contributory payments are made by the Authority towards the cost of bus fares.

A WORD OF ACKNOWLEDGMENT.

Clinic Staff.—I welcome the opportunity now presented of, in the first place, complimenting Miss Cameron, Superintendent Health Visitor, and her Staff, upon the exemplary and most commendable manner in which they have fulfilled their multifarious duties throughout the year. They have, as ever, worked devotedly and whole-heartedly and, beyond question or doubt, the mothers and children of this district indeed owe them an irredeemable debt of gratitude for the unremitting care and oversight which they have, at all times, so readily conferred upon them.

Miss Cameron, as the Supervisory Head, has again carried out her onerous and responsible duties most ably and conscientiously ; by her unflagging zeal, as by her hard work and unremitting efforts, she has again worthily upheld the good name and repute of the Service. As a personal tribute, let me say how greatly I appreciate the loyalty and co-operation she has at all times afforded me during the year.

Lady Voluntary Helpers.—I should here like to offer a passing word of thanks and appreciation to those ladies who again, throughout the year, have rendered such valiant service in our Clinics. Although an important, indeed indispensable, cog in the Clinic wheel, they carry out their duties so unobtrusively, and with such self-effacement, that, I sadly fear, their very presence is often-times overlooked, and the true value of the service they render unrecognised. The fact that, with characteristic modesty, they do not in the least seem averse to being regarded as the “hand-maidens” of the Clinic, should not be permitted to disguise their true worth, nor the merit of the great service they so cheerfully and so willingly render. Let me, on behalf of the Maternity and Child Welfare Service, again say “Many thanks.”

District Nurses.—Yet another most deserving body of public servants, whose work is all too apt to be taken for granted, with, sadly too often, but scant recognition of the immeasurable service they perform. Memories are proverbially short and the District Nurse who, in times of suffering and illness, was a thrice-welcome and eagerly awaited visitor, too often fades from the memory when the need for her ministrations ceases. This, therefore, is, I think, a suitable opportunity to put on record our profound and genuine appreciation of the work performed daily by our

District Nurses. I know full well that formal thanks is the last thing in this world they desire, but the assurance that they are so firmly entrenched in the esteem and affectionate regard of the people of this District must, never-the-less, I feel sure, be a source of profound gratification to them. For the humanitarian duties they so ably, and without thought of self, perform and for the self-sacrificing service they so willingly render, I, as Medical Officer of Health, wish to express our most sincere thanks.

INFANT MORTALITY.

STILLBIRTHS AND NEO-NATAL DEATHS.

During 1938, out of a total of 339 births, there were 19 infant deaths, thus giving an Infant Mortality Rate for that year—that is the proportion of children who died before reaching the age of one year per thousand live births—of 56·0, as compared with a figure of 68·37 in 1937, with 57·27 in 1936, with 38·6 in 1935, with 50·94 in 1934, and with 77·8 in 1933, the figures for the years 1932 to 1936 having reference to the old Rothwell district before the recent acquisition of the two added areas.

I shall now submit a table recording, in detail, and in age groups, the causes of those 19 under one year deaths, and indicating at the same time, the age periods at which those fatalities occurred.

A scrutiny of this table will reveal the arresting and most significant fact that, broadly, half the deaths so occurring took place during the **first week** after birth and that, no less significant, premature birth and congenital infirmity accounted for no fewer than 11 of the year's gross total of 19 infant deaths.

The real problem of infant mortality is thus seen to be a problem of the birth of weak, debilitated, and premature children. It is not a case of a normally healthy infant succumbing to attack by some intercurrent disease, but is a case of the birth of children so lacking in vitality, in vigour and in resistance power, that survival beyond the first week or so is a physical impossibility.

The cause of a preponderance of infant deaths is to be discovered in the pre-natal life of the child, and here we come back once again, unerringly, to the old, old story, namely ante-natal supervision, a story which exercises a dominant influence upon not only infant mortality, but, likewise, upon infant morbidities, that is, unfitness, degeneracy, and susceptibility to disease in general, leading so often, in the long run, to the obituary columns of a Report such as this. The lesson here is so plain that one wonders why it has been so ill-learnt.

TABLE 11
DEATHS OF INFANTS UNDER ONE YEAR.

Cause of Death.	Under 1 wk.		1-2 weeks.		2-3 weeks.		3-4 weeks.		1-3 mths.		3-6 mths.		6-9 mths.		9-12 mths.		Total	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
Congenital Debility and Premature Birth	7	2	0	1	0	0	0	0	1	0	0	0	0	0	0	0	8	
Pyelitis	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	1	
Broncho-Pneumonia ..	0	0	0	0	1	0	0	0	0	1	1	0	0	0	1	0	3	
Pyloric Stenosis ..	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1	
Gastritis	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	1	
Hæmorrhage into Pleural cavity (P.M.)	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	
	7	2	0	1	1	0	1	0	2	1	2	0	1	0	1	0	15	

The two following small tables are well worthy of careful notice. One deals with the matter of stillbirths—arising, as such conditions do, from causes identical with those which bring about infant mortality—and the other deals with neo-natal deaths—that is, deaths occurring during the first four weeks after birth.

Table No. 12a.
DETAILS OF STILL-BIRTHS
FOR THE PAST FOUR YEARS.

Year.	No. of Live Births.	No. of Still- Births.	Proportion of Still- births per 100 Live Births.
1935	233	15	6.4
1936	227	7	3.08
1937	351	6	1.7
1938	339	17	5.0

Table No. 12b.
DETAILS OF NEO-NATAL
DEATHS FOR THE PAST
FOUR YEARS.

Year.	No. of Live Births.	No. of Neo-Natal Deaths.	Proportion of Neo-Natal Deaths per 100 Live Births.
1935	233	5	2.1
1936	227	11	4.8
1937	351	24	6.8
1938	339	19	5.6

I wish to direct your earnest attention to a table, now presented, referring in detail to mortality in children under five years of age, the particulars being classified in age groups. This, in my view, is a table of transcendent importance and significance.

TABLE 13.

DEATHS OF CHILDREN UNDER FIVE YEARS. IN AGE GROUPS.

CAUSE OF DEATH.	Under 1 yr.		1-2 years.		2-3 years.		3-4 years.		4-5 years.		Total	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
Congenital Debility and Premature Birth ..	8	3	0	0	0	0	0	0	0	0	8	3
Pyelitis	1	0	0	0	0	0	0	0	0	0	1	0
Broncho Pneumonia ..	3	1	0	0	0	0	0	0	0	0	3	1
Pyloric Stenosis	1	0	0	0	0	0	0	0	0	0	1	0
Gastritis	1	0	0	0	0	0	0	0	0	0	1	0
Hæmorrhage into pleural cavity (P.M.)	1	0	0	0	0	0	0	0	0	0	1	0
Violence	0	0	0	0	0	0	0	1	0	0	0	1
Acute Intussusception ..	0	0	0	0	0	1	0	0	0	0	0	1
Scarlet Fever	0	0	0	0	1	0	0	0	0	0	1	0
Purpura	0	0	0	1	0	0	0	0	0	0	0	1
Tubercular Meningitis ..	0	0	0	0	0	0	1	0	0	0	1	0
TOTAL ..	15	4	0	1	1	1	1	1	0	0	17	7

ANTE-NATAL CLINICS AND MATERNAL WELFARE.

I will now submit a series of tables giving particulars relative to the activities of the Ante-Natal Clinic during the year, as well as other matters allied to it.

TABLE 14.

DETAILS OF ATTENDANCES DURING 1938.

Total No. of Expectant Mothers Attending.	Primiparae.	Multiparae.	No. of Sessions held.	Average Attendance per Session.	Percentage of Notified Births in Clinic Attendance.
227	92	135	59	10.3	53.68

Total attendances 602

TABLE 14a.

**PERIOD OF PREGNANCY AT WHICH FIRST ATTENDANCE
(1938) TOOK PLACE.**

1st month	2nd month	3rd month	4th month	5th month	6th month	7th month	8th month	9th month	Total.
1	6	25	28	50	61	30	26	—	227

NOTE.—Where women reside a mile or more from the Clinic, transport expenses are paid by the Authority.

TABLE 14b.

DEVIATIONS FROM NORMAL DETECTED DURING ANTE-NATAL CLINIC EXAMINATIONS.

Anæmia	3	Heart Disease (Variant forms)	8
Glycosuria	2	Tachycardia	2
Breech Presentation (referred for " X-Ray " and confirmed)	2	Hyperemesis	2
Extreme Varicosity	3	Goitre	1
Caries of Teeth requiring Dental Treatment	6	Femoral Hernia	1
Severe Dyspepsia	3	Scabies	1
		Hyperpiesis	7
		No abnormatliy	187

TABLE 14c.

CONFINEMENT HISTORY OF THE CASES IN ANTE-NATAL CLINIC ATTENDANCE DURING 1938.

Normal Deliveries	124	Miscarriages	2
Normal Deliveries associated with Ruptured Perineum ..	6	Referred to Hospital with Prolapse of cord, child still-born	1
Breech Presentation (Ruptured Perineum)	1	Termination of pregnancy owing to Hyperpiesis ..	1
Forceps Deliveries (Ruptured Perineum)	9	Admitted to Hospital, Hyperpiesis	1
Forceps Deliveries with no tear	2	Admitted to Hospital for Ante-Natal treatment only—	
Normal Delivery but Congenital Defect of Infant (Harelip) ..	1	Hyperemesis	2
Stillbirths	6	Removed from the area ..	1
Maternal death occurring in Hospital, child stillborn ..	1	No evidence of Pregnancy ..	1
Placenta Prævia—Removed to Hospital	2	Due for delivery during 1939 ..	66

TABLE 15.

PARTICULARS OF CASES ADMITTED TO MATERNITY HOSPITAL DURING 1938.

Uterine Inertia.	Abortion and Threatened Abortion.	Hyperemesis (Ante-Natal Treatment only).	Placenta Praevia.	Pyelitis.	Heart Disease.	Albuminuria.	Abnormal Presentations.	Ante-Partum Hemorrhage.	Unsatisfactory Housing Conditions.	Total.
2	5	2	2	1	1	2	4	1	5	25

Post-Natal Clinic.—I may here record the fact that a Post-Natal Clinic is held weekly in association with our Ante-Natal Clinics, and

though, in this matter of post-natal examination, there is a good deal of up-hill work, I am pleased with the steady progress we are making. Cases are now attending in increasing numbers and, with time and patience, we hope to overcome much of the reluctance, so characteristically shown by many recently confined women, to attend for further examination.

Maternal Mortality Rate.—During 1938, one maternal death occurred in this area, the death taking place in Hospital, thus presenting us with a Maternal Mortality Rate of 2·95 per 1,000 births, as compared with the National Rate of 2·97.

As a matter of interest, I may perhaps add that the average yearly Maternal Mortality Rate, in this district, for the five years' period 1934 to 1938 inclusive, was 2·60.

HEALTH ADMINISTRATION.

During the course of the Chapter on Maternity and Child Welfare, I submitted a compendious list of administrative provisions with relationship to that particular phase of Health Administration, and may now, at this stage, appropriately round off the full list of our provisions by adding the following items, making, I think it will be admitted, an impressive and comprehensive whole.

Hospital Provision.—(a) Hospital for Infectious Diseases.
(b) For Smallpox.

Tuberculosis.—Sanatoria, and Tuberculosis Dispensary, under the Authority of the West Riding County Council.

Maternity and Child Welfare.

- (a) Five Child Welfare Clinics ; one, the Central Clinic at Rothwell and one each at Stourton, Lofthouse, Methley and Oulton.
- (b) Ante-Natal Clinic held weekly at the Central Clinic, and monthly at the Methley Clinic.
- (c) Post-Natal Clinic held weekly at the Central Clinic.
- (d) Staff of three Health Visitors, one being the Supervisory Head.
- (e) Panel of Home Helps.

Details of all other Maternity and Child Welfare provisions are related under the heading " Rescue Services " earlier in this Report.

Immunisation (Diphtheria).—Sessions held at the Central Clinic and at all branch Clinics. For record of work done, during 1938, I refer you to Table 21 in this Report.

Midwifery Service.—There are five Midwives practising in this Area under the jurisdiction of the West Riding County Council.

Nursing Provision.—Voluntary Nursing Association, with staff of three nurses who, by arrangement, nurse in the home, on request, cases of Infectious Disease of a type not eligible for treatment in the Rothwell Isolation Hospital.

Venereal Disease.—Clinic held under the auspices of the West Riding County Council.

Ambulance Provision.—(a) For Infectious Disease, (b) Non-Infectious Disease and accidents; approved scale of charges for latter in operation.

Mortuaries.—Three : one in Rothwell, one in Stourton and one in Methley.

Public Health Staff.—See page 2 of this Report.

HOUSING.

ACCOMPLISHMENTS—AND SOME LIABILITIES.

In the immediately succedent paragraphs and tables will be found a record of our Housing activities during 1938, relating to all sections of the work—Slum Clearance, Individual Unfit Houses, Housing Inspection, New Houses, and re-housing provision. From such a survey it may be learnt that the year has been characterised by great activity in all phases of the work and that whilst, as regards Housing, the old, or pre-amalgamation, district of Rothwell is now fast approaching, admittedly not completion, but the high road towards it, candour compels me to say that the recently added areas, notoriously certain designated parts of them in particular, still present us with a problem of unquestioned magnitude, and one which will call for strenuous and sustained effort, not only in the immediate future, but for an indefinite period ahead.

Housing blots still patently existent must, without compunction, and as speedily as is practicably possible, be summarily wiped out of existence. Such, in a word, is the plain task confronting us.

RE-HOUSING AND SLUM CLEARANCE.

Since my last Report was presented to you, the question of Slum Clearance in the Rothwell Urban area has received the closest attention of the Health Department, and the preliminary survey referred to in that Report, has been followed up by actual detailed examination and by preparation for representations to the Council and to the Ministry of Health.

A Pressing Matter.—Some comments on the perplexing problem of Methley.—Although the housing conditions in Methley are, in general, of such a character as to warrant earnest and peremptory attention at the earliest possible moment, procedure relative to remedy has been regrettably delayed owing to the quite unusual difficulty experienced in procuring land in this particular area suitable for re-housing, an essential associate, of course, of any Slum Clearance Scheme.

I am, however, informed that, at the moment of writing this Report, negotiations are in being for procurement of land in the Methley area, suitable for Housing sites, and one trusts that we are, at length, within sight of material results to our long and searching quest.

Inspection of houses for subsequent representation in Slum Clearance Schemes is well advanced and action, comprehensive and far-reaching, will be immediate as soon as re-housing facilities are available.

A Sociological Truth.—It is the merest platitude to say that passive concurrence in the continued residence of people in houses of such a deplorable and depraved standard, as is a by no means unusual feature of Methley to-day, is neither fair to the individuals concerned nor, at the same time, is it wholly without risk and danger to the health, and even lives, of the misfortunated victims. To preach the virtues of Hygiene and, with tongue in cheek, to appeal for, and even, with effrontery, demand, observance of its laws and decrees, to people condemned to live and rear their families in hovels at which, in many cases, even a self-respecting cur would sniff contemptuously, comes, in my view, dangerously near to the border-line of cant and hypocrisy and this, incidentally, is by no means the first time I have given frank expression to similarly candid sentiments.

Housing Reform : A Record of Achievements.—In the remainder of the Rothwell area, a gratifyingly large amount of work has been done and it is indeed pleasing to be in a position to record that 22 Clearance Areas, comprising 150 houses, were represented in the early part of the year and that a Ministry of Health Inquiry into those was held on 29th November, 1938. Although it does not come strictly within the purview of this Report, I may perhaps be permitted to record the fact that, excluding three houses, in the case of each of which a mutual agreement as to repair was arrived at prior to the Inquiry, the whole of the representations were, without exception, confirmed by the Minister of Health. In addition, 15 further houses were represented under the Section relating to Individual Unfit Dwellings, and the necessary action was taken in connection therewith.

I may further record that the Ministry of Health Inquiry into 38 Dwellings, represented in 1937, was held in May, 1938. These were subsequently confirmed in whole, and the majority of the expelled tenants now enjoy the advantages and facilities of a modern Council house.

Many Gaps still to be Filled.—Much, therefore, has been done, as regards housing reform in this area, but much more still remains to be done.

It will, at a conservative estimate, require a few years' more hard work and graft before all parts of the new—that is now extended—Rothwell Urban area can be brought up to a satisfying, an equitable, and reasonably decent housing standard.

Owing to the magnitude of the task confronting us—again I particularise the problem presented in the recently added areas—we are still, and must continue to be for an indefinite period, in what may perhaps be termed the “pulling down” stage—a sort of negative, though none-the-less essential, preliminary to the “building up” stage—our avowed intent and ultimate objective.

A Temporary Hold-Up.—Whilst compiling this Report, I learn of an edict which, for the time being at least, puts the brake on Housing enterprise. It has been formally decreed that, for a period of three months, questions relative to Air Raid Precautions shall take precedence over all other administrative activities, whatever claim to importance such matters would, under normal circumstances, have had. This, whilst obviously an imperative and practical necessity, is, never-the-less, unfortunate and regrettable from the standpoint of, for example, Housing reform, and one of its inevitable repercussions must, to a greater or less degree, be curtailment of the year's output so far as our Housing attainments and accomplishments are concerned. When the afore-mentioned brake is ultimately released, re-doubled efforts must compensate for the loss of time and opportunity thus entailed.

TABLE 16.
PROGRESS MADE IN SLUM CLEARANCE WORKS
HOUSING ACTS, 1930-36

INDIVIDUAL UNFIT HOUSES.						CLEARANCE AREA.		
No. of Demolition Orders made.	No. of houses demolished.	No. of persons displaced.	No. of undertakings accepted.			No. of Areas.	Houses involved	Persons affected.
			To Repair.	Not to use for human habitations.	Persons displaced.			
80	36	124	1	15	58	28	178	601

HOUSING INSPECTION AND PROVISION OF NEW HOUSES.

I now beg to present, in Table form, and in a manner which, I trust, is readily understandable, a comprehensive record of our Housing activities during the year. Those Tables are self-explanatory, depicting, as they do, every conceivable aspect of the Housing question as relating to this district and need, I feel sure, no further elaboration.

TABLE 17.

SHOWING NO. OF NEW HOUSES ERECTED SINCE 1920.

Erected by	No. of new houses erected during 1938.			No. of houses erected since 1920.		
	State Aided	Without State Aid.	Total 1938.	State Aided.	Without State Aid.	Total 1920-- 1938
Local Authority ..	149	0	149	698	30	728
Private Enterprise ..	0	145	145	124	750	874
	149	145	294	822	780	1,602

TABLE 17a.

HOUSING ACTIVITIES DURING 1938.

No. of Houses Inspected.			No. of Visits made.		
Under Housing Act.	Under Public Health Act (Minor defects)	Total	Under Housing Act.	Under Public Health Act.	Total
895	915	1,810	987	1,613	2,600

Informal Notices.		Statutory Notices.		Houses Repre- sented as Clearance Areas.	Houses Demol- ished.
No. issued.	No. completed.	No. issued.	No. completed.		
301	312	12	8	150	3

RECORD OF OTHER ADMINISTRATIVE ACTIVITIES COMING WITHIN THE SCOPE OF THE HEALTH DEPARTMENT.

Sanitary Conveniences.—The work of Privy Conversion has proceeded steadily and, during 1938, twenty-one privies and six closets other than privies were abolished and replaced by washdown Water Closets. The ashpits connected to the privies were also closed and galvanised dustbins provided in their stead.

This matter of Privy Conversion is largely a post-amalgamation problem, the former Rothwell area having well-nigh arrived at the irreducible minimum stage. In the recently added areas, however,—I refer, in particular, to Methley and Mickletown—much yet remains to be done as regards conversions, although impending Slum Clearance Schemes in those latter districts, with consequent scheduling of many such houses, will automatically wipe many of them out of existence.

Ashpits.—With regard to dry ashpits, that is, ashpits not connected to privies, it is worthy of note that under new powers conferred by the Public Health Act, 1936, the old type of brick ashpit, often serving a number of houses, can be abolished and a dustbin provided for each house, an unquestioned hygienic improvement and one which, at the same time, reduces the period between the intervals of emptying from twenty-one to seven days. The work under those powers was not commenced until June, 1938, but, by the end of the year, 191 such ashpits had been replaced by 323 dustbins, a most gratifying hygienic improvement and one indeed creditable to the Staff concerned. This work will continue without halt until this type of ashpit is non-existent. Full details relative to the number and type of conveniences throughout the the area are given in the Sanitary Inspector's Report which will be found at the end of this one.

Town Planning.—No further development in the Rothwell section has taken place; Oulton and Woodlesford areas are in the same position as Rothwell, the Hunslet Rural Council, in which those townships were formerly incorporated, having previously been a member of the same Town Planning Committee. Preliminary details regarding the Town Planning of Methley are in hand.

Paving of Private Streets and Common Yards.—Routine observations continue to be made, but no serious contraventions were discovered. The Council continues to be represented on the West Riding Regional Smoke Abatement Committee by the Sanitary Inspector.

Bye-Laws and Adoptive Acts.—No further addition has been made during the year to the already extensive and imposing list operating in the district, although due consideration has been

given to the new Bye-Laws required under the Public Health Act, 1936.

Public Conveniences.—There are two modern and well-constructed public conveniences, one in Rothwell and one in Carlton. Methley has a convenience of a poor type, whilst in Oulton the public are allowed the use of a convenience belonging to a Hotel and, in return, the cleansing of the convenience in question is done by the Council's Staff. In the latter part of 1938, the erection of a Public Convenience of modern construction was commenced in Oulton.

Mortuaries.—Three. See list of Services listed earlier on in the Chapter headed "Health Administration."

Public Ambulances.—See list of provisions listed in Chapter headed "Health Administration."

WATER SUPPLY.

The water supply for the district has been obtained in the following amounts from the under-mentioned Local Authorities during the year.

Leeds Corporation	..	..	178,568,000	gallons
Morley Corporation	..	..	36,415,000	,,
Wakefield Corporation	..	..	23,120,000	,,
				<hr/>
				238,103,000
				<hr/>

Of this quantity, 102,324,000 gallons were used for trade purposes and the balance of 135,779,000 gallons was allocated to domestic purposes and leakage respectively.

The average daily consumption per head for domestic purposes was 15·30 gallons and, for trade purposes, 11·50 gallons.

Wells.—In the Inspector's Report, an addendum to this one, will be found a paragraph with detailed comment relative to all wells in this district, each of which has received the specific attention of the Inspector during the year. From this paragraph may be learnt particulars relating to the number and situation of such wells, reference to analyses of water samples, as also to procedure adopted to safeguard the public against the risks of contaminated drinking water.

SEWAGE DISPOSAL WORKS.

I am informed by the Surveyor that the main Sewage Works at Lemonroyd, as well as the subsidiary Works at Stourton and Thorpe, have again, throughout the year, functioned in a perfectly satisfactory and highly efficient manner.

Reference to Sewage Disposal Provisions in Methley Area.—The small works at Low Common and Green Lane, Methley, have, within their restricted capacity, produced reasonably satisfactory results ; at Pinder Green, Methley, a definite improvement has been effected by the installation of a new pump, which will enable those works to deal with a much larger volume of sewage than hitherto.

The Mickletown Works, likewise in the Methley area, are still taxed to their utmost by developments which have taken place in that village, but, by close supervision and careful management, the best results possible, under the circumstances, have been achieved.

To speak plainly, whilst the whole matter of sewage disposal provision in the Methley area in general cannot, by any stretch of imagination, be, in any conceivable sense, called either adequate or satisfactory, this denunciation refers more particularly to the Mickletown part of that area.

In the other small, and more or less detached, areas above referred to, the existing condition of things may, perhaps, be defined as “ passably efficient ” for the demands they have to meet, but it is very much to the contrary in the case of Mickletown, where drastic amendment is an urgent and imperative necessity. Those works, which are old, much the worse for wear, and, in every sense, “ unmodern,” must, without reservation, be classed as both inefficient and inadequate and are indeed, as a strict matter of fact, fast verging on the obsolete.

Modernised sewage disposal provision for Mickletown, indeed for Methley as a whole, is, in my view, and beyond all possible argument, a matter of indisputable urgency.

Further, Mickletown in particular is the projected scene of impending and far-reaching Slum Clearance Schemes with, as a consequence, the erection of many new houses—an estimated figure for Methley is 300 to 350—each, of course, possessing a Water Closet and, incidentally, likewise, a Bath.

The moral here, I think, needs no further elaboration.

Reference to Rothwell—Oulton Trunk Sewer.—This trunk sewer, in its course of approximately three-quarters of a mile, from Gillett Bridge, Rothwell, through the Public Park, to Oulton Recorder House, is old, very dilapidated throughout most of its length and is notoriously unsatisfactory and inadequate for the vital function it presumes to perform. The only possible, or practical, procedure is its root and branch extermination and the laying of a new sewer throughout its entire length, admittedly a task of no small magnitude and one, beyond all question, calling for very considerable outlay. I am well aware that action has been

hampered, and prolonged delay occasioned, by land subsidence due to Colliery workings, but such admitted adverse factors in no way lessen the urgency of the matter nor diminish the obvious, and indisputable, risks arising from a defective main sewer. That such risks, of problematic magnitude, do exist and that they may, at some unforeseen moment, develop into material happenings, is beyond argument.

I can conceive of no menace to health, and, possibly, life, greater than that of a main sewer which, it is admitted on every hand, is extensively defective and inadequate, one which is, frankly, in the last, and irreparable, stage of decrepitude, and, in the interests of the health and safety of the people of the area concerned, I appeal for the re-construction of this sewer at the earliest possible moment consistent with practicable possibility, and assuredly without a moment's avoidable delay.

In the Report of the Sanitary Inspector, an appendix to this one, will be found a corresponding reference to this same vexed question.

NOTIFICATION OF INFECTIOUS DISEASES.

The following table is self-explanatory.

TABLE 18.

DETAILS OF INFECTIOUS DISEASES IN EACH WARD AND YEAR, 1934-1938.

Ward.	Small-pox.	Scarlet Fever.	Diphtheria.	Erysipelas.	Pulmonary Tuberculosis.	Other Tubercular Diseases.	Puerperal Fever and Puerperal Pyrexia.	Typhoid Fever.	Encephalitis Lethargica.	Poliomyelitis.	Pneumonia.	Ophthalmia Neonatorum.	Cerebro-Spinal Fever.	Total 1938.	Total 1937.	Total 1936.	Total 1935.	Total 1934.
North	0	13	1	1	2	3	0	0	0	0	5	0	0	25	38	79	30	57
South	0	6	0	1	3	1	1	0	0	0	2	1	0	15	23	39	16	41
Stourton	0	10	3	2	2	0	0	0	0	0	3	2	0	28	26	21	34	47
Lofthouse-with-Thorpe	0	17	0	2	1	4	2	0	0	0	10	3	0	39	47	59	28	36
Carlton	0	13	4	3	3	3	0	0	0	0	6	2	0	31	33	43	29	37
Dulton	0	5	7	1	2	1	0	0	0	0	4	0	0	20	24	Not	avail	able
Woodlesford	0	8	0	2	2	2	0	0	0	0	2	0	0	16	13	"	"	"
Methley	0	5	4	1	3	3	3	0	0	0	5	0	0	24	36	"	"	"
Leeds Institution & Children's Homes	0	1	7	3	0	0	0	0	0	0	1	0	0	12	13	16	20	8
Isolation Hospital	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Total 1938	0	78	26†	16	18	17	6	0	0	0	38	8	0	207				
Total 1937	0	133	22	18	13	11	6	0	0	0	45	4	0		252			
Total 1936	0	181	16	14	9	1	2	1	0	1	30	1	0			256*		
Total 1935	0	72	31	12	11	6	1	0	0	0	22	1	1				157*	
Total 1934	0	100	59	13	13	7	3	0	0	0	28	3	0					226*

* Rothwell Urban District before absorption of new areas.

† Inclusive of seven cases occurring in the Public Assistance Institution (Leeds City) and removed to their own Isolation Hospital in Leeds.

The subjacent Table shows the above notified cases classified in Age Groups :—

TABLE 19.
CASES OF INFECTIOUS DISEASE (EXCLUDING TUBERCULOSIS)
DURING 1938, IN AGE GROUPS.

0-1 year.	1-2 years.	2-3 years.	3-4 years.	4-5 years.	5-10 years.	10-15 years.	15-20 years.	20-35 years.	35-45 years.	45-65 years.	Over 65 years.	Total.
9	1	3	10	9	49	18	15	23	10	17	8	172

The following table relative to Hospital admissions during the year explains itself.

TABLE 20.
PARTICULARS OF CASES OF INFECTIOUS DISEASE ADMITTED
TO HOSPITAL.

WARD.	1938.									1937.								
	Erysipelas.	Smallpox.	Scarlet Fever.	Typhoid Fever.	Diphtheria.	Puerperal Pyrexia.	Ophthalmia Neonatorum.	Pneumonia.	Total.	Smallpox.	Scarlet Fever.	Typhoid Fever.	Diphtheria.	Puerperal Fever and Puerperal Pyrexia.	Ophthalmia Neonatorum.	Pneumonia.	Total.	
North	1	0	11	0	1	0	0	0	13	0	17	0	3	0	0	1	21	
South	0	0	4	0	0	1	0	1	6	0	8	0	1	1	0	0	10	
Stourton	0	0	9	0	3	0	0	0	12	0	16	0	1	0	0	0	17	
Lofthouse-with-Thorpe	0	0	14	0	0	1	0	0	15	0	19	0	0	0	0	0	19	
Carlton	0	0	11	0	4	0	0	0	15	0	8	0	1	0	0	0	9	
Oulton	1	0	2	0	7	0	0	0	10	0	14	0	2	0	0	0	16	
Woodlesford	0	0	5	0	0	0	0	1	6	0	7	0	0	0	0	0	7	
Methley	0	0	2	0	4	1	0	0	7	0	15	0	4	1	1	0	21	
Leeds Institution & Children's Homes	0	0	1	0	7	0	0	0	8	0	0	0	10	0	0	0	10	
Isolation Hospital	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Totals	2	0	59	0	26	3	0	2	92	0	104	0	22	2	1	1	130	

NOTE.—Of the above cases notified during 1938, seven cases of Diphtheria, all occurring in the Public Assistance Institution (Leeds City) were removed by the latter Authority to their Isolation Hospital at Seacroft, Leeds. One case of Puerperal Pyrexia was removed to St. James's Hospital, Leeds.

REVIEW OF INFECTIOUS DISEASE RECORDS DURING 1938.

The following is a brief review of our Infectious Disease experiences during 1938 :—

Infantile Diarrhoea.—Statistics are recorded up to 2 years of age only, and, during 1938, no death occurred. No more than four such deaths have been recorded during the past eight years—high testimony to an improved sanitary and housing standard, as well as to the teaching of dietetics in our Clinics.

Measles.—Mildly epidemic—no death.

Whooping Cough.—Likewise mildly epidemic—no death.

Ophthalmia Neonatorum.—Eight cases notified; all made complete recovery. Where hospital treatment is considered necessary this is readily available in the Isolation Hospital and, in cases in which the attendant practitioner deems such a step necessary, the services of an Ophthalmic specialist are available for consultation at the patient's home—this service being free of cost.

Encephalitis Lethargica.—No case notified—last notification was fourteen years ago.

Cerebro-Spinal Fever.—No case recorded.

Acute Anterior Poliomyelitis.—No case notified—Two cases recorded during the past six years, though, in passing, let me say that it is far from being a justifiable assumption that no further cases have actually occurred.

Pneumonia.—Thirty-eight cases notified—ten deaths, some of the latter, as indicating laxity in notification, not being notified in the first place. For comments on Hospital provision for Pneumonia, I beg to refer you to a paragraph on Pneumonia appearing in the chapter headed "Isolation Hospital" further on.

Puerperal Pyrexia.—Six cases notified, of which two were removed to the Isolation Hospital, and one to St. James's Hospital, Leeds. No death occurred.

Smallpox.—No cases recorded; Rothwell is one of a group of Authorities constituting a joint area, served by a common Smallpox Hospital.

Erysipelas.—Sixteen cases notified—no deaths. Where such provision is considered necessary, accommodation is available in the Isolation Hospital and, during 1938, two such cases were afforded such Hospital treatment.

Typhoid Fever : Paratyphoid Fever.—No cases recorded ; only one such case has occurred in this area during the past sixteen years.

Scarlet Fever.—During 1938, 78 cases were notified, of which 59 were removed to Hospital ; the remaining 19 cases were retained at home, the responsible officials being satisfied, after investigation, that fully adequate isolation facilities were available in the respective homes. Two deaths were recorded. Further reference to Scarlet Fever will be found in the Report on the Isolation Hospital further on.

Diphtheria.—Twenty-six cases notified, of which seven occurred in the Public Assistance Institution (City of Leeds), leaving a net district total of no more than nineteen cases for the year, of which one occurred in the North Ward of Rothwell, three in Stourton Ward, four in Carlton Ward, four in the Methley Ward and seven in the Oulton Ward. Three Wards, namely, South Ward of Rothwell, Lofthouse-with-Thorpe Ward, and the Woodlesford Ward, showed a clean slate during the year as regards Diphtheria. No death from Diphtheria was recorded during the year.

Obviously, the gross number of cases occurring is too small to call for any detailed commentary or criticism, though, perhaps, in this connection, a brief reference to our Diphtheria experiences since our intensive Immunisation campaign of a few years ago is warranted.

Some Impressive Facts.—During the three years, 1933, 1934 and 1935—what I might term the immediately pre-immunisation period—we admitted to Hospital an average of 47 cases per year ; during the immediately post-immunisation years, 1936 and 1937, the figure had fallen to twenty-six, whilst for 1938, it fell to the still more reduced figure of 19. During the past three years combined not one child who had undergone Immunisation treatment has been admitted to Hospital from the Rothwell Area. So far as figures are capable of speech, the Diphtheria records, before and since the above-mentioned Immunisation campaign, proclaim a triumphant success for this perfectly safe preventive process, and point, unerringly, the way, and seemingly the only practical, the only sure and certain, way towards ultimate eradication of this most dread and fatal child disease.

A figure approaching 45 per cent. represents the number of children between the ages of one year and fifteen who, in this area, have undergone the full Immunisation process—my figure refers specifically to the pre-amalgamation area of Rothwell, as I have not available the exact figures for the recently added Methley and Oulton and Woodlesford Areas.

Though the tempo has naturally slowed down, as compared with the "rush" figures of the intensive campaign of a few years ago, we are still dealing with a gratifyingly large number of children every year, in all parts of the area. What the figures for 1938 were may be seen from a study of the subjoined table, which gives detailed particulars of our Immunisation activities during the year.

TABLE 21
IMMUNISATION RECORDS, 1938.

1-2 years.	2-3 years.	3-4 years.	4-5 years.	5-10 years.	10-15 years.	Over 15 years.	Total.
30	18	23	18	22	2	2	115

Note.—Treatment consists of three fortnightly inoculations.

TUBERCULOSIS.

The following Tables give, with statistical detail, full information relating to the incidence and mortality of Tuberculosis during 1938.

TABLE 22.
Cases of Pulmonary Tuberculosis notified during 1938,
in age groups.

Ward.	0-5 years.		5-10 years.		10-15 years.		15-20 years.		20-35 years.		35-45 years.		45-65 years.		Over 65 years.		Total	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
North ..	0	0	0	0	0	0	0	0	1	0	0	0	1	0	0	0	2	0
South ..	0	0	0	0	0	0	0	1	1	0	1	0	0	0	0	0	2	1
Stourton ..	0	0	0	0	0	0	0	0	0	1	1	0	0	0	0	0	1	1
Lofthouse-with- Thorpe ..	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1	0
Carlton ..	0	0	0	0	0	0	0	0	1	0	1	0	0	0	1	0	3	0
Oulton ..	0	0	0	0	0	0	0	1	1	0	0	0	0	0	0	0	1	1
Woodlesford ..	0	0	0	0	0	0	0	0	0	1	0	0	0	1	0	0	0	2
Methley ..	0	0	0	0	0	0	0	0	0	1	1	0	1	0	0	0	2	1
TOTAL ..	0	0	0	0	0	0	0	2	5	3	4	0	2	1	1	0	12	6

NOTE.—Of those eighteen notified cases of Pulmonary Tuberculosis, seven died during the currency of the same year.

TABLE No. 22a.

Cases of Non-Pulmonary Tuberculosis notified during 1938,
in age groups.

Ward.	0-5 years.		5-10 years.		10-15 years.		15-20 years.		20-35 years.		35-45 years.		45-65 years.		Over 65 years.		Total	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
North	0	0	0	0	0	0	1	1	0	1	0	0	0	0	0	0	1	2
South	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0
Stourton ..	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Lofthouse-with-Thorpe ..	0	1	0	1	3	0	0	0	0	0	0	0	0	0	0	0	3	2
Carlton	0	1	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	2
Oulton	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0
Woodlesford ..	0	0	0	0	0	0	0	1	0	1	0	0	0	0	0	0	0	2
Methley	0	0	1	0	0	0	0	0	1	1	0	0	0	0	0	0	2	1
TOTAL	0	2	3	1	3	0	1	2	1	4	0	0	0	0	0	0	8	9

TABLE No. 22b.

DEATHS FROM PULMONARY TUBERCULOSIS DURING 1938.

Ward.	10-15 years.		15-25 years.		25-45 years.		45-65 years.		over 65 years.		Total.	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
North	0	0	1	0	0	0	1	0	0	0	2	0
South	0	0	0	0	0	0	0	0	0	0	0	0
Stourton ..	0	1	1	0	0	2	0	0	0	0	1	3
Lofthouse-with-Thorpe ..	0	0	0	0	0	0	0	0	0	0	0	0
Carlton	0	0	0	0	1	1	0	0	1	0	2	1
Oulton	0	0	0	0	0	0	0	0	0	0	0	0
Woodlesford ..	0	0	0	0	0	0	0	0	0	0	0	0
Methley	0	0	0	1	1	0	1	0	0	0	2	1
TOTAL	0	1	2	1	2	3	2	0	1	0	7	5

It may be noted that, of the gross total of 260 deaths registered in the district, during 1938, from all causes, one death in 22 was due to Pulmonary Tuberculosis, as compared with one in 27 in 1937,

and with one in 23 in 1936, and, as five deaths were recorded during the year from other forms of Tubercular Disease, we find that one death in 15 of all district deaths recorded was due to Tubercular Disease, as compared with one in 27 in 1937, with one in 18 in 1936, with one in 27 in 1935 and with one in 44 in 1934.

Before concluding, I should like, on behalf of the Rothwell Urban Council, to offer thanks for the great service rendered by the Tuberculosis Dispensary, established in this district by the West Riding County Council.

The following small table gives information regarding Sanatorium admissions and discharges during the year.

TABLE No. 22c.
DETAILS OF SANATORIUM CASES.
1938.

	Ad- missions.	Dis- charges.	Deaths in Sana- torium.
Males	18	13	4
Females	13	11	1
Total	31	24	5

ISOLATION HOSPITAL.

In consideration of the Hospital's activities during 1938, the first point to be noted in the gratifyingly small admission figure for that year. No more than 104 patients were admitted, as compared with 131 in the preceding year, 1937, and with the undoubtedly impressive figure of 283 in 1936.

A Lesson from the Past.—The diseases which are our main concern are Scarlet Fever and Diphtheria—Typhoid, the remaining member of the trio for whose benefit the Hospital was originally built, having, nowadays, forfeited all claim to serious consideration, no more than **three** cases having been admitted during the past **seventeen** years combined, a vivid contrast indeed to the state of affairs during the preceding seventeen years, which complete the 34 years covering the Hospital's life and service. During that—judged by modern conceptions—ill-starred period, we admitted to this Hospital an average of between **seventeen and eighteen** cases of Typhoid yearly, one notorious year, 1911, being distinguished by an admission figure of no fewer than 44 cases to its own credit, or rather, discredit.

What an incentive, what an urge, to progressive-minded administrators, and what a testimony to resolute housing and sanitary reformation !

For the pleasing reduction in our gross admission figure during 1938, we are chiefly indebted to Scarlet Fever, which shows a reduction of 45 cases as compared with its immediate predecessor, and one of no fewer than 195 as contrasted with the somewhat unhappy 1936 record.

Concerning Diphtheria.—As regards Diphtheria, a similarly pleasing state of affairs is evidenced. During 1938, a gross total of 39 cases of this disease were admitted, twenty of which—just over 50 per cent. of the whole—being subsequently proved to be negative (for details of negative cases see Table 23a) leaving a net admission figure of 19 positive cases. This return, taken in conjunction with the even more meagre figure of 12 in 1937—those two years come within the full influence of our intensive Immunisation campaign—provides a striking and most welcome contrast to the 1935 and 1934 figures of 66 and 94 respectively.

Two cases of Erysipelas, two of Puerperal Pyrexia, and two of Pneumonia rounded off our complement of patient inmates for the year.

Reference to Pneumonia and Hospital Provision.—First of all, let me say that we have beds in our Hospital available for treatment of Pneumonia cases and, during the year, two patients, each of whom made a good recovery, were removed to Hospital. I think it is regrettable that more use is not made of this facility. If there be one thing certain it is that hygienic surroundings and skilled nursing exercise a profound influence on recovery chances in the case of this disease, and that such chances are correspondingly diminished from deprivation of those aids and provisions, a characteristic lack in, indeed, many of the homes in this District. Success in the treatment of such cases of Pneumonia as have been removed to Hospital ought to be an inducement towards admission of many further cases, but candour compels one to say that this unfortunately is not so. It is, indeed, regrettable that many victims of Pneumonia are thus denied opportunities, freely available, which might well make the difference between recovery and—well, not. Appropriately to round off this paragraph, let me recall to your minds that, during 1938, ten deaths occurred in this district from Pneumonia.

Essential Services.—I may note, in passing, that all essential services, including the drainage system, have, throughout the year, carried out their respective duties in an exemplary manner and without a hitch.

I have, in the following tables, endeavoured to present a record of the work carried out in the Wards during the year, as well as other matters of statistical importance, and I think such tables, one and all, will be found self-explanatory.

As a final word, let me say that the Hospital has, once again, performed its allotted functions in an admirable, convincing, and, in every sense, adequate and satisfactory manner, and that it has, in the fullest, met all needs of the area it serves.

NURSING STAFF.

I should be failing in an obvious duty, were I to omit reference to the most efficient and praiseworthy manner in which the Nursing Staff has fulfilled its onerous and responsible duties throughout the year. They, by the manner in which, under all circumstances, they have devoted themselves to the care and wellbeing of their patients, have proved themselves worthy, in the highest degree, of the confidence and trust of the Hospital Committee. That so many of our patients are, as customarily appertains to a Fever Hospital, very young children and, consequently, calling for incessant care and oversight during even the later convalescing period, when they are up and about and in no sense ill, demands qualities of tact, of patience, and forbearance beyond the ordinary and apart altogether from any question of Nursing skill. Our Nurses have, during the year, met all such exacting demands in a manner deservedly entitling them to the tribute I have just paid.

Matron.—If it be, as I suggest, true to say that the attributes and talents of a Matron are reflected in the work and performances of the Staff under her control, then the paragraph above speaks for itself. A good Staff pre-supposes a good Matron. Though neither the Hospital, nor the Hospital Staff, is large comparatively, it is yet large enough to afford ample opportunities for display of administrative and supervisory qualities if, indeed, in the smaller Institution such opportunities are not actually greater than in the larger because of the enforced retention of the full reins of government in the hands of one individual, rather than, as in the case of a large Hospital, deputising a substantial share of authoritative control to others.

The Matron needs no further testimony as to her administrative qualities than is reflected in the smooth and harmonious working of the Hospital machine throughout the year.

Finally, I should like to offer my warm thanks and appreciation for the ungrudging help and loyalty which the Matron has, at all times, afforded me during the year under present review.

The following statistical tables show in a concise manner the work carried out in the Wards throughout the year, as well as several other matters of interest and importance.

TABLE No. 23.

Showing the number of Admissions and Discharges of Patients sent in by the various Wards, during the period January 1st to December 31st, 1938.

Ward.	No. of cases in Hospital at end of 1937.	No. of cases admitted during 1938.	Total No. of cases actually in Hospital during 1938.	No of cases discharged during 1938.	Deaths during 1938.	No. of cases in Hospital at end of 1938.	Total.
North	3	14	17	13	1	3	17
South	0	5	5	5	0	0	5
Stourton	2	16	18	15	0	3	18
Lofthouse-with-Thorpe ..	3	16	19	17	0	2	19
Carlton	0	22	22	20	0	2	22
Oulton	1	3	4	4	0	0	4
Woodlesford	1	7	8	8	0	0	8
Methley	5	11	16	15	1	0	16
Leeds Public Assistance Committee	0	1	1	1	0	0	1
West Riding C.C. (Oulton Hall)	0	9	9	7	2	0	9
TOTAL	15	104	119	105	4	10	119

TABLE No. 23a.

Showing net number of Admissions after deduction of
NEGATIVE Cases of Diphtheria.

Gross Total admissions during 1938.	Negative Cases.	Net admission figure. (Positive Cases).
104	20	84

TABLE No. 24.

Showing particulars of cases of Admission during 1938.
(Including NEGATIVE Cases of Diphtheria.)

	Scarlet Fever.	Typhoid.	Diph- theria.	Puerperal Pyrexia.	Pneu- monia.	Erysip- elas.	Total.
Males	30	0	24	—	1	1	56
Females	29	0	15	2	1	1	48
TOTAL	59	0	39	2	2	2	104

TABLE No 25.

Showing particulars of cases of Discharge during 1938.

	Scarlet Fever.	Typhoid.	Diph- theria.	Puerperal Pyrexia.	Pneu- monia.	Erysip- elas.	Total.
Males	32	0	20	—	1	0	53
Females	33	0	15	2	1	1	52
TOTAL	65	0	35	2	2	1	105

Mortality Rate — Four deaths were recorded during 1938, thus giving a general Death Rate for the Hospital of 3.66 per 100 patients discharged.

TABLE No. 26.

Showing particulars of cases in Hospital at end of 1938.

	Scarlet Fever.	Diphtheria.	Total.
Males	2	4	6
Females	3	1	4
TOTAL	5	5	10

TABLE No. 27.

Comparing Admissions of 1938 with those of other years.

	1938	1937	1936	1935	1934	1933	1932	1931	1930	1929	June 28th, 1904 to Dec. 31st, 1928.	Total since Hospital was opened.
Scarlet Fever ..	59	104	254	101	115	81	38	55	115	96	2,046	3,064
Typhoid ..	0	0	1	0	0	1	0	0	0	0	206	208
Diphtheria ..	39	25	27	66	94	42	17	31	42	36	594	1,013
Influenza ..	0	0	0	0	0	0	0	0	0	0	4	4
Pneumonia ..	2	1	1	3	1	0	0	3	0	2	21	34
Puerperal Pyrexia	2	1	0	1	0	0	2	1	0	0	1	8
Puerperal Fever	0	0	0	0	2	4	0	1	0	0	0	7
Tubercular Meningitis ..	0	0	0	0	0	0	0	1	0	0	0	1
Cerebro-Spinal Fever ..	0	0	0	0	0	0	1	1	0	0	0	2
Erysipelas ..	2	0	0	0	0	0	0	0	0	0	0	2
	104*	131	283	171	212	128	58	93	157	134	2,872	4,343

* See Table 23a.

TABLE No. 28.

Showing Rate of Admission per 1,000 Population.

	Gross Admissions.		Net Admissions.	
Scarlet Fever	2.4		2.4	
Diphtheria	1.6		0.78	
All diseases	4.26		3.43	

TABULATED RECORDS OF VITAL STATISTICS (1938) AS RELATING TO THIS AREA.

The following table is self-explanatory.

TABLE No. 29.

RECORD OF VITAL STATISTICS FOR 1938, WITH CORRESPONDING FIGURES FOR THE PAST DECADE.

Year.	Population (Estimated.)	No. of Deaths.	No. of Births.	Death Rate per 1,000 inhabitants.	Birth Rate per 1,000 inhabitants.	Deaths under 1 year per 1,000 Births.	Total Noti- fications of Infectious Disease.	Zymotic Death Rate
1938	24,440	260	339	10.38	13.87	56.0	207	0.082
1937	24,350	265	351	10.88	14.41	68.37	252	0.041
1936	15,520	159	227	10.24	14.62	57.27	256	0.257
1935	15,400	164	233	10.64	15.13	38.62	157	0.389
1934	15,430	176	216	11.40	14.00	50.94	226	0.648
1933	15,390	169	180	10.98	11.69	77.8	170	0.195
1932	15,640	159	237	10.16	15.15	40.9	100	0.51
1931	15,639	184	263	11.76	16.6	72.0	140	0.38
1930	15,770	150	257	9.51	16.29	31.0	242*	0.31
1929	15,700	224	235	14.2	14.9	89.0	181	0.25
1928	15,740	180	265	11.4	16.8	71.0	186	0.13

* Including 100 cases of Smallpox

FOOD INSPECTION.

A REFERENCE TO INSPECTOR'S REPORT.

In the Report of the Inspector, an annex to this one, will be found details and statistical records of food inspection work carried out by him during the year, dealing with, for example, milk supplies and dairies, distribution and retailing of milk, supervision of cowsheds, report on inspection of milk cattle and cowsheds by the West Riding County Inspector, details of analyses of milk, with reference to quality standard and dirt contents, food samples, meat and slaughter-house inspection, fish-frying, in short, a comprehensive record of everything with any conceivable relationship to the question of quality and purity of food.

SANITARY ADMINISTRATION.

The Sanitary Inspector, as the responsible official, deals in his Report with, in addition to those activities relative to food above enumerated, many other varied and diverse matters, such as Scavenging and Refuse Removal, Abatement of Nuisances, Disinfection work and Infectious Disease investigations, Privy

Conversions, Records and Statistical Tables relating to all matters concerned with every phase of Housing work in its most inclusive sense—everything, in a word, coming under the comprehensive term “Sanitary Administration.”

Well-Merited Tribute.—I must take advantage of the opportunity, now presented, to extend to Mr. Wilson, Senior Sanitary Inspector, my sincere thanks for the unfailing and loyal support he has, once again, afforded me during the year. The co-operation and help, so willingly and freely rendered, have been invaluable to me.

Mr. Wilson, one of whose chief characteristics is his outstanding and patent conscientiousness in all matters relative to the work of his Department, may, by his unquestionably able and competent direction and control of affairs, as by the thorough and most capable manner in which he has, at all times, carried out the multitudinous and responsible duties devolving upon him as head of the Sanitary Services of this Authority, justifiably claim the lion's share of the credit for the highly efficient standard which those Services have to-day attained.

As records in this Report show, Slum Clearance Schemes have, during the year, been perhaps the outstanding activity of this Health Authority and in this precise work of intimate, critical, and detailed inspection of several hundred houses—what may be termed the all-important spade work preparatory to my submission of representations—Mr. Naylor, Additional Sanitary Inspector, to whom I now wish to offer a well merited word of tribute, has been conspicuously successful and has proved himself an adept.

Apart altogether from other and obvious qualities with which Mr. Naylor is well endowed, success in work of this type demands the faculty of assiduous and painstaking attention to details, as well as a quite unusual measure of tact and discretion and, by the able and skilful manner in which he has fulfilled those most responsible duties, Mr. Naylor has shown himself to be unusually well-equipped in all essentials necessary for success in this exacting and specialised work.

In passing, I must not overlook the perhaps less obtrusive, but none-the-less valuable, services rendered by Mr. Idle, Junior Additional Sanitary Inspector. He has shown himself to be a zealous and most capable officer and one who, by his trustworthiness, as by his energy and hard work throughout the year, has deservedly earned this brief tribute.

A Word of Acknowledgment.—I must here, on behalf of the Rothwell Urban Council, express our profound thanks for the much valued and greatly appreciated services, so generously rendered by Dr. Potts, the County Medical Officer of Health, and his laboratory

staff, with regard to bacteriological examinations and other kindred work. That our many requests for assistance in such matters have, at all times, met with such prompt and courteous response, assuredly does nothing to lessen our great sense of appreciation of the services thus rendered.

In conclusion, I should like to convey to the Chairman and members of the Council and, in particular, to the Chairman and members of the Health Committee, the Isolation Hospital Committee, and the Maternity and Child Welfare Committee, my appreciation of the ready and unfailing support they have, at all times, afforded me during the year.

I beg to remain, Gentlemen,

Yours faithfully,

HUGH STEVENSON,

Medical Officer of Health.

Rothwell, 1939.

ANNUAL REPORT

OF THE

Senior Sanitary Inspector and Cleansing Superintendent, for the year 1938.

To the Chairman and Members of the
Rothwell Urban District Council.

Gentlemen,

I beg to submit for your consideration and information the following, being my 7th Annual Report on the year's work.

The year 1938 has been eventful to the last degree, the ordinary phases of our work being intermingled with Air Raids Precautions and National Crises to provide a harassing but changeable twelve months.

By now one is quite accustomed to the feeling of "greatness" occasioned by the acquisitions of 1937 and although these are still referred to as the "new district" they are accepted as part and parcel of our lot, and a trip to the farthest part of Methley no longer savours of a journey into the unknown; in fact so much work has been done in the added areas that it is the old Rothwell which is becoming strange.

Perusal of the appended tables and my amplification thereof will indicate clearly that, in spite of the many vicissitudes which have occurred, the work of the Department, as shown by the records, will withstand the closest scrutiny.

In this respect, praise is due to Mr. Naylor and Mr. Idle who, in their capacity as Additional Inspectors, have been assiduous in the pursuit of their duties and the statistics recorded are indicative of their energy.

For my own part I was absent from duty for a period of three weeks during May owing to illness, and although this was immediately prior to our first Clearance Area Inquiry the staff by unceasing work completed the evidence, so that when I attended the Inquiry I found everything down to the last detail prepared.

HOUSING.

Housing and kindred matters have claimed a large proportion of the Department's time during 1938, but there has been some satisfaction in the work, so positive has it been in character, and in future it will be possible to look around and say "this is what was done in 1938."

The six Clearance Areas which were represented in 1937 were the subject of a Ministry of Health Inquiry on May 25th, 1938, and it is pleasing to record that these were confirmed *in toto*. No sooner was this completed than work commenced on the preparation of other areas for representation so that by August, 25 more Areas, comprising 150 houses, were submitted. The Inquiry into the evidence regarding these was held on November 29th, 1938, but the result was of course not available during the report year.

This work as can well be imagined, absorbed a tremendous amount of time, but still other work was not neglected, reference to the Housing statistics showing that the number of ordinary inspections has increased to the figure of 2,600 for Housing and Public Health combined.

165 houses, being the 150 in Clearance Areas and 15 Individual Unfit houses, were regarded as totally unfit for human habitation, while 674 required improvement to a greater or lesser degree, and were the subject of informal notices, 312 being rendered fit as a result thereof. It was found necessary later to serve 12 Statutory Notices under the Housing Act, 1936, 8 of which were completed in the year while 353 notices of a similar character were issued under the Public Health Act, 1936, 349 being marked off as completed.

It is worthy of note that the erection of new houses continued, 149 being erected by the Council and 145 by private enterprise.

It is, however, unfortunate that the provision of new houses in the Methley area is held up owing to the difficulties which have been experienced in purchasing land for re-housing and although several plots were surveyed it was not found possible to purchase these. The result is that Slum Clearance in Methley, where such work is sorely needed is held up until such time as land is secured, it being a necessary corollary to representation of unfit dwellings, that the provision of new houses is undertaken, a procedure which primarily requires sites on which to build.

HOUSING STATISTICS.

1.—Inspection of Dwelling-houses during the year.

(1)(a) Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts)	1,810
(b) Number of inspections made for the purpose ..	2,600

(2) (a) Number of dwelling-houses (included under sub-head (1) above), which were inspected and recorded under the Housing Consolidated Regulations, 1925 and 1932	895
(b) Number of inspections made for the purpose ..	987
(3) Number of dwelling-houses needing further action..	839
(a) Number considered to be in a state so dangerous or injurious to health as to be unfit for human habitation	165
(b) Number (excluding those in sub-head (3) (a) above) found not to be in all respects reasonably fit for human habitation	674

2. Remedy of defects during the year without service of formal notices.

No. of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their Officers	312
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3. Action under Statutory Powers during the year.

A.—Proceedings under Sections 9, 10 and 16, Housing Act, 1936.

(1) No. of dwelling-houses in respect of which notices were served requiring repairs	12
(2) No. of dwelling-houses which were rendered fit after service of formal notices	8
(a) By owners	8
(b) By Local Authority in default of owners	0

B.—Proceedings under Public Health Acts :—

(1) No. of dwelling-houses in respect of which notices were served requiring defects to be remedied	353
(2) No. of dwelling-houses in which defects were remedied after service of formal notices ..	349
(a) By owners	349
(b) By Local Authority in default of owners ..	0

C.—Proceedings under Sections 11 and 13 of the Housing Act, 1936 :—

(1) No. of representations, etc., made in respect of dwelling-houses unfit for habitation	15
(2) No. of dwelling-houses in respect of which Demolition Orders were made	11
(3) No. of dwelling-houses demolished in pursuance of Demolition Orders	0

D. Proceedings under Section 12 of the Housing Act 1936 :—

- (1) Number of separate tenements or underground rooms in respect of which Closing Orders were made 0
- (2) Number of separate tenements or underground rooms, the Closing Orders in respect of which were determined, the tenement or room having been rendered fit 0

4. Unhealthy Areas.

The following areas were declared Clearance Areas during the year 1938 :—

Area No.	Situation.				Population.			No. of Houses.
7.	Stourton	..	..	..	5	..	2	
8.	Lofthouse	..	..	..	5	..	2	
9.	Ouzelwell Green	..	..	..	10	..	3	
10.	Rothwell	..	..	..	19	..	5	
11.	Woodlesford	..	..	..	9	..	3	
12.	Woodlesford	..	..	..	42	..	15	
13.	Woodlesford	..	..	..	27	..	7	
14.	Woodlesford	..	..	..	53	..	15	
15.	Woodlesford	..	..	..	8	..	3	
16.	Oulton	..	..	..	23	..	7	
17.	Oulton	..	..	..	25	..	7	
18.	Woodlesford	..	..	..	13	..	4	
19.	Woodlesford	..	..	..	3	..	2	
20.	Woodlesford	..	..	..	19	..	5	
22.	Woodlesford	..	..	..	19	..	6	
28.	Oulton	..	..	..	19	..	4	
29.	Rothwell	..	..	..	46	..	14	
30.	Lofthouse	..	..	..	21	..	7	
31.	Lofthouse	..	..	..	47	..	17	
32.	Carlton	..	..	..	12	..	3	
33.	Rothwell	..	..	..	42	..	13	
34.	Rothwell	..	..	..	23	..	6	
				Total No. of Houses	..	..	150	

These areas were represented in the early part of 1938, and the Ministry of Health Inquiry was held on 29th November, 1938. The whole of the houses, with the exception of 5, were confirmed by Order in 1939.

5. Number of new houses erected during 1938.

(a) By the Local Authority	..	..	..	..	149
(b) By Private Enterprise..	..	..	..	..	145
Total				..	294

6. Housing Conditions.

- (1) Total number of houses in the District 6,935
- (2) No. of working-class houses included in the above.. 6,686

ABATEMENT OF NUISANCES.

During the year 338 nuisances were reported, or found on inspection, being, as is customary, in the main concerned with stoppages in drains and sewers, and remedied forthwith by the Cleansing Staff as part of the service. It was necessary to issue 7 Informal Notices to secure the abatement of nuisances outside the scope of the service, such notices being complied with immediately.

Under the heading of nuisances, I am impelled to refer to one which has existed for some time and is still unabated ; I refer to the trunk sewer from Rothwell to Oulton. This sewer has failed for a considerable time to cope with the excesses due to storms and continued wet weather, is considerably out of level, and undoubtedly distorted and defective, due to the fall of the land through which it passes, brought about by mining operations below. After receiving the report of Consulting Engineers the Council in their wisdom have deferred the matter for reasons, no doubt, of cost and the risk of further damage to the new work by continued subsidence, but I hope that the matter will be reviewed and action taken before the collapse of the sewer makes such imperative.

TENTS, VANS AND SHEDS.

The enforcement of the appropriate sections of the Public Health Act, 1936, has given rise to many difficulties in connection with the control of caravans, and although the Feast Ground, our only caravan settlement, has been virtually cleared, the position, even in 1939, is not settled. An application for license to allow the ground to be used has been received, and the granting of such license may ultimately prove to be the most satisfactory means of control, as, otherwise, certain classes of campers could resort there without any but the most general control.

REFUSE COLLECTION AND DISPOSAL.

As I indicated in my last report, certain changes were necessary in Methley, and the Council, after due consideration, accepted my recommendation that a modern form of cleansing be instituted and a Karrier Bantam 7 c. yard refuse motor was purchased.

The staff was reorganised to meet the new requirements, a central tip for that district arranged on a derelict portion of one of the Council's sewage works, and, after clearing up the customary small difficulties associated with such re-organisation, the service was found to work on satisfactory lines.

In Oulton and Woodlesford the position is much the same as last year except that, in the re-organisation, I instituted a seven days' period between the emptying of dustbins, instead of partly seven and partly three days which operated before. This change

brought a host of complaints and I was later instructed by the Health Committee to re-introduce the old methods. Although it may seem retrograde on my part to desire a longer period than that in operation, when the modern trend is towards more frequent emptyings, the reason was that I was convinced from actual inspection that the overflow from the dustbins, which was the condition which actuated the complaints, was occasioned by the misuse on the part of the tenants of the houses, and the introduction of material which should have first been incinerated on the kitchen fire. What the public need is education, not more frequent emptying and in proof of that I refer to the rest of the area where seven days is the accepted period and no difficulty is experienced. I appreciate the difficulties of the mining fraternity whose issue of coal always contains a large proportion of incombustible material, but arrangements are made for the hard "scale" to be deposited alongside the bins, an arrangement which works satisfactorily in other parts of the district where miners live.

Disposal continues to be partly to controlled tips where our own staff are employed, and partly to farmers' tips where strict supervision is maintained, but the latter are slowly but surely decreasing as the refuse, once eagerly sought after for its manurial value, is now such a heterogenous collection of tins, bottles, and paper, that it is of more value as old junk than manure.

A total number of 12,912 loads of refuse, being 11,803 cart loads of $3\frac{1}{2}$ c. yards capacity and 809 motor loads of 7 c. yards capacity were removed during the year, 4,715 cart loads being to farmers' tips, the rest being controlled.

Salvage has continued, although the amount is limited by reason of the scattered tips. The amounts of various commodities sold are as follows :—

			Tons.	Cwts.	Qrs.
Scrap Metal (unbaled)	.. 40 loads	..	31	11	3
Waste Paper (baled)	.. 2 loads	..	11	11	3
Broken glass	.. .. .	..	6	3	0
Bottles and glass jars	.. 312 dozen.				

The Cesspool and Gully emptying machine bought in 1937 continues to work very satisfactorily and has undoubtedly been a wise purchase. In addition to the normal work in our own and the adjoining Urban district of Stanley, where the machine is hired out two or three days each month, new work has been found for it at the sewage works, emptying detritus tanks. This necessary work aforetime provided a malodourous and uncongenial task for the workmen, but is now quickly and hygienically undertaken by the new machine, the duties of which are so many and varied that the days are hardly long enough for it to perform them all.

The details of the work are given in tabular form below :—

	Cesspools.	Gullies.	Sewage Tanks.
No. emptied ..	1,188	15,833	65
Loads	2,824	314	684

SANITARY CONVENIENCES.

21 privies and 6 pail closets were, during the year, converted to water closets, and 20 ashpits connected to the above privies, and 191 dry ashpits were abolished and replaced by dustbins. Table 1 below gives the details of the various numbers and types of sanitary conveniences within the area.

TABLE 1.
DETAILS OF SANITARY CONVENIENCES IN THE DISTRICT,
31st DECEMBER, 1938.

NUMBER AND TYPE OF CLOSETS.					NUMBER AND TYPE OF ASHPITS.			
Water-Carriage System.		Dry System.		Total.	Movable Bins.	Dry Fixed Ashpits.	Ashpits Connected with Privies.	Total.
Fresh Water.	Waste-Water or Hand Flushed.	Fixed Receptacles.	Movable Receptacles.					
6,009	101	731	45	6,826	5,204	448	428	6,080

Power is now given under the Public Health Act, 1936, to require the provision of dustbins in substitution of ashpits, which are a relic of the past and a curse from the cleansing point of view. During 1938 the work of replacement was commenced and good progress made, 190 ashpits being replaced by 323 dustbins. I recollect that in a previous report I bemoaned the fact that the day was far distant when such ashpits could be legally removed, but I have apparently been unduly pessimistic, as the change in law has rendered this desirable state of affairs within reach, and it is now only a question of devoting time to this matter and the goal will be reached.

The Council have, also, under power given under the same Act, very wisely fixed a standard of bins to be used in compliance with notices requiring their provision, and the high standard decided upon will be to their everlasting credit.

DRAINAGE.

The drains at all new houses and buildings erected during the year have been inspected and smoke tested before approval. Plans are still certified by this Department as to correctness of drainage layout before submission to the Council.

The new byelaws required by the Public Health Act, 1936, have been framed on the Ministry of Health model, and I note with some regret the passing of the clause requiring the insertion of intercepting traps. Although perhaps, I am with the minority, in looking on these with favour, my opinion is not one whit altered and I have yet to be convinced that such traps do not serve a useful purpose. That they are more nuisance than advantage I do not for one moment believe, the fault, in my experience, always being due to faulty laying or misuse.

SMOKE ABATEMENT.

Only two observations were taken during the period under review, this being one of the sections of work which has had to give way to more pressing demands. I still however continue to be a member of the West Riding Regional Smoke Abatement Committee and have attended their meetings with advantage.

FACTORIES AND WORKSHOPS.

Three inspections of factories were made during the year, and one notice to remedy defective sanitary accommodation was served and complied with.

MILK AND DAIRIES.

No. of cowkeepers in the district	.. .. .	39
No. of persons registered as Retail Purveyors	..	84
No. of premises registered as dairies	.. .. .	66
One cowkeeper holds an Accredited Milk Licence.		

Milk (Special Designations) Orders, 1936-8.—Seven supplementary licences under the above orders were issued, two to sell Tuberculin Tested and five to sell Pasteurised milks.

Milk Sampling —63 samples of milk were taken during the year and sent for analysis, being made up as follows :—

18 informal samples	..	} Analysed for
17 formal samples	..	
18 informal samples	..	} chemical quality.
10 informal samples	..	
	..	} Analysed for dirt present.
	..	
	..	} Subjected to methylene blue
	..	
		test and biological test for
		bacteria.

Of those analysed for chemical quality, two informal and one formal, samples were found to be deprived of natural fat, and one formal sample contained added water. No statutory action was

taken, the vendors being warned by the County Council where necessary.

Four bacteriological samples were reported as being unsatisfactory and the premises and method of production were investigated in each case. Two biological samples were returned as containing b. tubercle, and the cows responsible were isolated and dealt with by the Officers of the Ministry of Agriculture and Fisheries.

Appended is a table showing the dirt present in parts per million :—

None.	Trace.	0-5 parts.	5-10 parts.	10-20 parts.
1	3	4	5	5

Veterinary Inspection.—This service is taken over from the County Council by the Ministry of Agriculture and Fisheries and, during the year, one inspection of the milk producing farms was made.

FOOD SAMPLING.

12 informal samples of various foods were taken and analysed during the year, all being reported as genuine.

MEAT INSPECTION.

A further slaughter-house was licensed during the year, making 6 Licensed and 2 Registered within the area.

The position regarding Registered slaughter-houses will require to be reviewed when the Food and Drugs Act, 1938 becomes operative, and these, if satisfactory, will require annual licences. The following tables show the amount of meat inspected and condemned.

TABLE 2.
MEAT INSPECTION DURING 1938.

No. of visits.	Carcases inspected.			
	Beef.	Mutton.	Pork.	Veal.
541	437	582	552	11

TABLE 3.
MEAT CONDEMNED DURING 1938

Tuber- culosis.	Cirrhosis.	Distoma- tosis.	Oedema.	Fever.	Other causes.	Total weight in lbs.
1,197	50	14	316	630	44	2,251

OFFENSIVE TRADES.

The 31 fish frying establishments which are still registered have been operated without nuisance, as has also the Oleine Works which is the only other trade under this title.

PETROLEUM.

37 licences, to store a total quantity of 1,762,150 gallons of Petroleum Spirit, and 1 licence to store 1,000 lbs. of Carbide of Calcium, were issued under the Petroleum Consolidation Act, 1928. The bulk storage depot at Woodlesford is now completed and the storage figures are included above. The stores have been properly maintained during the year.

DISINFESTATION AND DISINFECTION.

Below is given a comprehensive table showing the number and types of disinfestations carried out during the year. No notices have been served during the year requiring disinfestation as the property owners are quite willing to pay for this service to be done by our staff, which is mutually advantageous as we know the work is done efficiently. The property and effects of Slum Clearance tenants are disinfested before transfer to new houses regardless of whether bed bugs are found or not, a wise proceeding in property where the risk of vermin is so high.

TABLE No. 4.

Details of Disinfestation during 1938.

	Council Houses.	Other Houses.	Total.
No. of houses found to be infested . .	19	37 (including 18 Slum Clearance)	73
Number disinfested . .	19	37	56

	Disinfestor Gaseous Blocks.	Spray. Zaldecide.	Total.
Methods Employed	Fumoids —8 houses. Lawes' blocks — 29 houses	19	56

Bedding at Oulton Hall (West Riding Mental Home) was steam disinfested for crab lice.

Harold Hall, Oulton, was sprayed for vermin.

WELL WATER SUPPLY.

Although the water supplies in general are from bulk supplies purchased from Leeds and Morley Corporations certain remote dwellings are supplied from wells, 5 being in Methley area, one in Carlton and one in Lofthouse, and early in the year a survey was made of these. By arrangement with the West Riding County Council samples from each well were analysed chemically and bacteriologically, when it was found that the water in six cases did not reach the standard laid down by the Ministry of Health. The users were immediately warned by personal visit, and in writing, of the danger of using the water in a raw state, and steps were taken to have the matter put in order.

Two small groups of houses each served by a well, were re-presented under the Housing Act, 1936, two wells were closed, town's water being substituted in each case, and the two remaining were altered structurally to prevent the contamination which was assumed to be the cause of the adverse reports.

These wells will be allowed time to gain a state of purity, samples being taken periodically, and if such purity is not attained will be further dealt with.

TRAVELLING.

After long consideration of the matter the Council have granted me an allowance in respect of the use of my car for my daily work, and although this is only for a trial period at present I am sure that from the results obtained this allowance will be made permanent. The effect of one car in the Department has, in my opinion, been nearly the equivalent of another assistant, for the work in the out-lying parts of the district can now be dealt with expeditiously and more time is left for other tasks.

I now come to the close of yet another Annual Report and here again it is my privilege and pleasure to be able to record thanks for all the assistance I have received.

To my staff individually and collectively I am intensely grateful for their loyal co-operation and support, without whose daily help this report would be but a meagre one, and I thank them for the work they have done so willingly and well.

To the rest of the Council officials and Councillors I am indebted for their assistance, and to Dr. Stevenson I would particularly say "Thank you" for his co-operation and advice.

I am, Gentlemen,

Your obedient Servant,

THOS. WILSON.

Rothwell, 1939.

